DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FOLLOWING ADMINISTRATION

Marsas (02-14)

Approved; 07/26/02

Electric; 04/01/02 FORM APPROVED OMB NO. 0938-0193

TRANSMITTAL AND NOTICE OF APPROVAL OF	TRANSMITTAL NUMBER:	2. STATE:		
STATE PLAN MATERIAL	SDA #02 14	Van		
HEALTHCARE FINANCING ADMINISTRATION	SPA #02-14 _	Kansas		
	3. PROGRAM IDENTIFICATION: TITLE XIX	OF		
	THE SOCIAL SECURITY ACT (MEDICAID)			
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TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION	4. PROPOSED EFFECTIVE DATE			
DEPARTMENT OF HEALTH AND HUMAN SERVICES	April 1, 2002			
5. TYPE OF PLAN MATERIAL (Check One):	7,011 1,202			
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#6.c.	Attachment 3.1-A			
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10. SUBJECT OF AMENDMENT:				
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KANSAS MEDICAID STATE PLAN

Replacement Page Attachment 3.1-A

Chiropractic Services Limitations

Services are limited to one chiropractic history and physical per calendar year unless medical necessity justifies more:

Collection and handling of a laboratory specimen for transfer to a laboratory is noncovered.

See Attachment 3.1-A, #4.b. for Chiropractic service limitations for children under 21 years of age.



KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

Docking State Office Bldg. Room 651 South JANET SCHALANSKY, SECRETARY

Health Care Policy / Medical Policy

Robert Day, Director

Phone: (785) 296-3981 Fax: (785) 296-4813

May 14, 2002

Mr. Thomas Lenz Associate Regional Administrator for Division of Medicaid Room 227, Federal Office Building 601 E. 12th Street Kansas City, MO 64106

re: Kansas Medicaid Program: Proposed State Plan Amendment (SPAs) #02-I4 re: Chiropractic Services Limitations

Dear Mr. Lenz:

Attached for your review and approval is State Plan Amendment (SPA) #02-14 deleting Chiropractic Services Limitations from the State Plan service. Due to implementation of HIPAA we needed to review the local code usage to determine how we would handle the billing procedures. During the course of that review, we determined we would delete the service altogether due to low utilization rates. Effective April 1, 2002, procedure code Y1501 (Chiropractic history and physical) will be non-covered. Crossover claims from Medicare are the only chiropractic services covered.

If you or your staff have any questions regarding this proposed SPA please contact Rita Haverkamp at (785) 296-5107.

Stalonk

Sincerely,

Janet Schalansky

Secretary

JS/RH/rh Attachments

cc: Kim Brink SRS File Copy

DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FOLLOWING ADMINISTRATION

Marson (02-14)

Approved: 07/26/02

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OMB NO. 0938-0193

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DEPARTMENT OF HEALTH AND HUMAN SERVICES	April 1, 2002			
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May 14, 2002

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Schalank

Sincerely,

Janet Schalansky

Secretary

JS/RH rh Attachments

cc: Kim Brink SRS File Copy